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### Required Documents Checklist

In order for us to match you with the best specialists and the most appropriate services, we need some information. The checklist below will guide you through what is necessary.

- Completed Patient Information form
- Completed Email Consent Form
- Completed Authorization for Release of Protected Health Information
- A copy of your passport (*photograph page only*)
- Copies of both sides of your insurance and prescription cards (*if applicable*)

**Complete copies of your most recent medical records in English, including:**

- History & Physical (within 6 mos. old)
- Consultation reports/notes with primary diagnosis / current treatment plan
- Operative reports
- Laboratory test results
- Radiology films/CDs and written reports (*within 6 mos. old*)
- EKG
- Pathology slides and written reports (*if applicable*)

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In order to maintain our commitment to protecting your personal health information, please send copies of all documents (**NOT ORIGINALS**) to the attention of:

**Patient Coordinator, Global Medicine Services**  
Jupiter Medical Center  
1210 So. Old Dixie Highway  
Jupiter, FL 33458  
Office: (561) 263-5050 Fax: (561) 263-0458  
Email: [Global.Medicine@jupitermed.com](mailto:Global.Medicine@jupitermed.com)